

License Type: 34 One Day Beer & Wine
License Nontransferable

LICENSE NO. 9544034
Receipt No. 2525195
Fee Paid \$50.00
Geographical Code 1933

APPLICATION:

Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the above designated license(s) for the location also described below.

ORGANIZATION: HOLLYWOOD FOREVER INC-ENDOWMENT CARE & MEMORIAL CARE
LOCATION ADDRESS: 6000 SANTA MONICA BLVD
LOS ANGELES, CA 90038

TYPE OF EVENT: OTHER EVENT
HR/DATES DURING WHICH
ALCOHOL WILL BE SOLD: September 22, 2018
5PM-11PM

ESTIMATED ATTENDANCE: 3250

AUTHORIZED REPRESENTATIVE / ADDRESS

JAY BOILEAU
6000 SANTA MONICA BLVD
LOS ANGELES, CA 90038

LICENSE:

The above-named organization is hereby licensed, pursuant to Section 24045.1 of the Business and Professions Code and Rule 59.5 of the California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the above-named location for the period authorized below. This license does not include off-sale ("to-go") privileges. This license may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace, and morals of the people of the State.



Good for 1 day(s). Date Issued September 17, 2018.

Director of Alcoholic Beverage Control

By AM

DAILY LICENSE APPLICATION/AUTHORIZATION - Non Transferable

Instructions: Complete all items. Submit to local ABC District Office with required fee (Cashier's Check or Money Order) payable to ABC. Once license is issued, fee cannot be refunded. For a listing of ABC District Offices please visit <http://www.abc.ca.gov/distmap.html>

Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the license(s) described below.

LICENSE NUMBER _____ GEO CODE _____

RECEIPT NUMBER _____

FEE
\$ _____

DIAGRAM REQUIRED

☒ Yes ☐ No☐ Yes ☐ No

1. ORGANIZATION'S NAME

Hollywood Forever Inc. - Endowment Care & Memorial Care

CONDITIONS REQUIRED

☐ Yes ☐ No

2. LICENSE TYPE (Check appropriate license type AND organization type)

a. ☐ Daily General (\$25.00) (Includes beer, wine and distilled spirits)☐ Political Party/Affiliate Supporting Candidate for Public Office or Ballot Measure☐ Organization Formed for Specific Charitable or Civic Purpose☐ Other: _____☐ Fraternal Organization in Existence Over Five Years with Regular Membership☐ Religious Organization☐ Vessel per Section 24045.10 B&P (\$50.00)

NUMBER OF DISPENSING POINTS

b. ☐ Special Daily Beer (\$25.00)☐ Charitable☐ Fraternal☐ Social☐ Political☒ Special Daily Beer & Wine (\$50.00)☐ Special Daily Wine (\$25.00)☐ Civic☐ Religious☒ Cultural☐ Amateur Sports Organization

NUMBER OF DISPENSING POINTS

1

c. ☐ Special Temporary License (\$100.00)

(Different privileges depending on statute)

☐ Television Station per Section 24045.2 or 24045.9 B&P☐ Nonprofit Corporation per Sections 24045.4 and 24045.6 B&P☐ Person conducting Estate Wine Sale per Section 24045.8 B&P☐ Women's Educational and Charitable Organization per Section 24045.3 B&P☐ Other Special Temporary Licenses, per Section

License number

Amount \$

3. EVENT TYPE

☐ Dinner☐ Dance☐ Wedding☐ Lunch☐ Picnic☐ Barbeque☐ Social Gathering☐ Festival☐ Sports Event☐ Concert☐ Birthday☐ Mixer☐ Carnival☐ Dinner Dance☒ Other:

class film screening

4. TOTAL # OF DAYS

1

5. ESTIMATED ATTENDANCE

3250

6. HOURS OF ALCOHOLIC BEVERAGE SALES, SERVICE AND/OR CONSUMPTION

From 5:00pm

To 11:00pm

7. EVENT DATE(S)

Saturday 09.22.2018

8. EVENT IS OPEN TO THE PUBLIC

☒ Yes☐ No

9. EVENT LOCATION (Give facility name, if any, street number and name, and city)

Hollywood Forever Cemetery - 6000 Santa Monica Blvd, Los Angeles, CA 90038

10. LOCATION IS WITHIN THE CITY LIMITS

☒ Yes☐ No

11. TYPE OF ENTERTAINMENT

classic film: YELLOW SUBMARINE

12. SECURITY GUARDS

☒ Yes☐ No

If yes, how many? _____

13. AUTHORIZED REPRESENTATIVE'S NAME

Jay Boileau

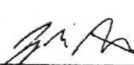
14. REPRESENTATIVE'S TELEPHONE NUMBER

15. REPRESENTATIVE'S ADDRESS

6000 Santa Monica Blvd, Los Angeles, CA 90038

16. ORGANIZATION'S MAILING ADDRESS (If different from #15 above)

17. AUTHORIZED REPRESENTATIVE'S SIGNATURE



18. DATE SIGNED

08.24.2018

PROPERTY OWNER APPROVAL BY (Name), REQUIRED

Yogu Kanthiah

PHONE NUMBER

[REDACTED]

PROPERTY OWNER SIGNATURE



DATE SIGNED

08.24.2018

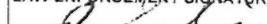
LAW ENFORCEMENT APPROVAL BY (Name), IF APPLICABLE

CAPD - (SAKOWSKI #24457)

PHONE NUMBER

[REDACTED]

LAW ENFORCEMENT SIGNATURE



DATE SIGNED

8/27/18

DISTRICT OFFICE APPROVAL BY (Name)

ABC EMPLOYEE SIGNATURE

ISSUANCE DATE

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